



DEQ STATEWIDE ACL VARIANCE PROCEDURE

1. DEQ will do a statewide variance and statewide public notice to cover facilities that submit a variance request with the fee by close of business on February 1, 2007.
2. Facilities who have already submitted requests and facilities that submit requests by February 1, 2007, will pay the \$390 fee, but will not pay for or process a specific public notice, since they are covered by the statewide variance. Facilities who submit requests after February 1, 2007, will pay the \$390 fee, pay for their own public notice and process their own public notice for an individual variance.
3. Once a variance is completed to utilize the DEQ default ACL values under #2 (as either coverage under statewide variance or individual variance), and as long as facilities choose to utilize these DEQ default ACL values, no future variance will be required. A facility may choose to submit a specific variance now or at any time in the future to allow use of non-DEQ default values, pay the fee, and pay the public notice.
4. The statewide variance will contain language that facilities accept DEQ default ACL values for this and future EPA toxicity changes and retain the option of submitting a specific request to use other values at any time. The option to submit their own value and have DEQ review it is not waived by using the statewide variance.
5. DEQ developed a short form for facilities to check a box for coverage under the statewide variance (see attachment). Alternatively, facilities can submit a short letter indicating their request. DEQ will route and process these together to increase efficiency.
6. The statewide variance will be posted on the DEQ website and published in major newspapers for a 30-day comment period. If the notice appears ~2/5/07, and there are no public comments or the public comments can be addressed, the statewide variance can be effective ~3/5/07.

Attachment



STATEWIDE ACL VARIANCE PETITION

Based on the recently updated DEQ default groundwater alternate concentration limits (ACL), the DEQ identified several facilities for which a variance petition is necessary in order to replace their out-dated ACL values, or to include ACLs for those constituents for which there is no promulgated maximum contaminant level (MCL) or for which background data is not available. To assist these facilities, the DEQ has developed a statewide variance process. For facilities choosing to participate, the DEQ will process the required public notice for facilities that accept the Department's default ACL values, and who submit variance requests prior to February 1, 2007. Additionally, the DEQ will accept responsibility for the associated public notice costs for these participating facilities. For those facilities that utilize the default ACLs, no future variance request will be necessary to update or replace the ACLs established through this process. However, each facility retains their option of submitting a variance request for ACL values other than Department-derived default values now or in the future. Please note, facilities that desire to submit a variance now or in the future for establishing ACLs other than the DEQ default ACLs will be required to pay for and process their own public notice.

To be included in the statewide variance process, the Department requests that facilities complete and submit this form and fee by February 1, 2007. Please note that the regulations require a base variance fee (currently \$390.00) to accompany this signed variance petition. For facilities submitting a petition for the statewide ACLs, submittal of this form will meet the requirements of 9VAC20-80-790 and a separate petition will not need to be submitted.

Facility Name: _____

Permit Number: _____

Facility Contact Person: _____

Address: _____

Phone Number: _____

E-mail address: _____

Base variance petition fee attached?: ☐ YES ☐ NO

"I certify that I have personally examined and am familiar with the information submitted in this petition and all attached documents, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

Authorized Signature: _____